

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U- <u>25060</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2005</u> Through: <u>12</u> / <u>31</u> / <u>2005</u>
3. Name and address of person filing. Name <u>Orbie</u> <u>L</u> <u>Harris III</u> P.O. Box, Bldg., Room No., if any _____ Street <u>1706 Wayside Dr.</u> City <u>Texas City</u> State <u>Texas</u> ZIP Code + 4 <u>77590-8460</u>	4. Name, file number, and address of labor organization. Name <u>International Association Ironworkers #135</u> Labor Organization File Number <u>003-700</u> P.O. Box, Building and Room Number, if any _____ Street <u>216 Gulf Fwy. N.</u> City <u>Texas City</u> State <u>Texas</u> ZIP Code + 4 <u>77591</u>
5. Position in labor organization. <u>President</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name _____ Trade Name, if any: _____ P.O. Box, Bldg., Room No., if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	7.a. Nature of Interest, Transaction, or Income. _____ 7.b. Amount. _____

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>Orbie Harris III</u>	On <u>3/10/2006</u> Date	<u>409-935-2421</u> Telephone Number

Name of Person Filing Orbie Harris III	File Number U-
---	-----------------------

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <input type="text" value="Zenith Administrators Inc."/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text" value="Suite 2600"/></p> <p>Street <input type="text" value="541 N. Fairbanks Ct."/></p> <p>City <input type="text" value="Chicago"/></p> <p>State <input type="text" value="Illinois"/> ZIP Code + 4 <input type="text" value="60611-3389"/></p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <input type="text" value="Texas Ironworker' Funds"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text" value="P.O. Box 721798"/></p> <p>Street <input type="text"/></p> <p>City <input type="text" value="Houston"/></p> <p>State <input type="text" value="Texas"/> ZIP Code + 4 <input type="text" value="77272-1798"/></p>	<p>11.a. Nature of such dealing.</p> <div style="border: 1px solid black; padding: 5px; min-height: 80px;">Administrative Agent</div> <p>11.b. Approximate dollar value of such dealing. <input type="text" value="\$6,000,000"/></p> <p>12.a. Nature of interest held or income received.</p> <div style="border: 1px solid black; padding: 5px; min-height: 100px;">Hotel, airfare, wages, rental car and meal reimbursement - International Foundation New Trustee classes Health Funds 11-11-2005 thru 11-16-2005</div> <p>12.b. Amount. <input type="text" value="\$560"/></p>

<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name <input type="text"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/> ZIP Code + 4 <input type="text"/></p>	<p>14.a. Nature of payment.</p> <div style="border: 1px solid black; height: 150px;"></div>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment. <input type="text"/></p>

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Zenith Administrators Inc.

Trade Name, if any:

P.O. Box, Bldg., Room No., if any Suite 2600

Street 541 N. Fairbanks

City Chicago

State Illinois ZIP Code + 4 60611-3389

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Texas Ironworkers' Funds

Trade Name, if any:

P.O. Box, Bldg., Room No., if any P.O. Box 721798

Street

City Houston

State Texas ZIP Code + 4 77272-1798

11.a. Nature of such dealing.

Administrative Agent

11.b. Approximate dollar value of such dealing.

\$287,000,000

12.a. Nature of interest held or income received.

Hotel, airfare, wages, rental car and meal
reimbursement-
International Foundation New Trustee classess
Pension Funds - 11-11-2005 thru 11-16-2005

12.b. Amount.

\$2,238

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Zenith Administrators Inc.

Trade Name, if any:

P.O. Box, Bldg., Room No., if any Suite 2600

Street 541 N. Fairbanks Ct.

City Chicago

State Illinois

ZIP Code + 4 60611-3389

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Texas Ironworker' Funds

Trade Name, if any:

P.O. Box, Bldg., Room No., if any P.O. Box 721798

Street

City Houston

State Texas

ZIP Code + 4 77272-1798

11.a. Nature of such dealing.

Administrative

11.b. Approximate dollar value of such dealing.

\$280,000,000

12.a. Nature of interest held or income received.

Wage reimbursement - Trustee meeting
Pension Funds 4-11-2005 thru 4-12-2005

12.b. Amount.

\$379

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name **Zenith Administrators**

Trade Name, if any:

P.O. Box, Bldg., Room No., if any **Suite 2600**Street **541 N. Fairbanks Ct.**City **Chicago**State **Illinois** ZIP Code + 4 **60611-3389**

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name **Texas Ironworkers Funds**

Trade Name, if any:

P.O. Box, Bldg., Room No., if any **P.O. Box 721798**

Street

City **Houston**State **Texas** ZIP Code + 4 **77272-1798**

11.a. Nature of such dealing.

Administrative Agent

11.b. Approximate dollar value of such dealing.

\$6,000,000

12.a. Nature of interest held or income received.

Wage reimbursement - Trustee meeting
Health Funds - 4-11-2005 thru 4-12-2005

12.b. Amount.

\$95

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Zenith Administrators Inc.

Trade Name, if any:

P.O. Box, Bldg., Room No., if any Suite 2600

Street 541 N. Fairbanks Ct.

City Chicago

State Texas ZIP Code + 4 60611-3389

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Texas Ironworkers' Funds

Trade Name, if any:

P.O. Box, Bldg., Room No., if any P.O. Box 721798

Street

City Houston

State Texas ZIP Code + 4 77272-1798

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

11.a. Nature of such dealing.

Administrative Agent

11.b. Approximate dollar value of such dealing.

\$280,000,000

12.a. Nature of interest held or income received.

Wage reimbursemnt - Trustee meeting
Pension Fund - 10-24-2005 thru 10-25-2005

12.b. Amount.

\$333

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name **Zenith Administrators Inc.**

Trade Name, if any:

P.O. Box, Bldg., Room No., if any **Suite 2600**Street **541 N. Fairbanks Ct.**City **Chicago**State **Illinois** ZIP Code + 4 **77272-1798**

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name **Texas Ironworkers Funds**

Trade Name, if any:

P.O. Box, Bldg., Room No., if any **P.O. Box 7211798**

Street

City **Houston**State **Texas** ZIP Code + 4 **77272-1798**

11.a. Nature of such dealing.

Administrative Agent

11.b. Approximate dollar value of such dealing.

\$6,000,000

12.a. Nature of interest held or income received.

Wage reimbursement - Trustee meeting
Health Funds - 10-24-2005 thru 10-25-2005

12.b. Amount.

\$83